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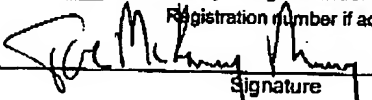
OCT 27 2006

PTO/SB/22 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031

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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 <small>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</small> | | Docket Number (Optional) 4392-0156P | |
| Application Number 10/802,752-Conf. #5342 | | Filed March 18, 2004 | |
| For METHOD AND APPARATUS FOR POWER MANAGEMENT OF AN ELECTRONIC DEVICE | | | |
| Art Unit 2115 | | Examiner M. A. Connolly | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | Fee \$120 \$450 \$1020 \$1590 \$2160 | Small Entity Fee \$60 \$225 \$510 \$795 \$1080 | \$ 120.00 \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . I have enclosed a duplicate copy of this sheet. | | | |
| I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>32,334</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____ | | | |
|  _____ Signature Joe McKinney Mundy _____ Typed or printed name | | _____ October 27, 2006 Date (703) 205-8026 Telephone Number | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted. | | | |

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